Image# 13964794832 PAGE 1 / 40

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

						Office Us	e Only
1. NAME OF TO COMMITTEE (in full)	YPE OR PRINT ▼		ple: If typir he lines.	ng, type	12FE4I	M5	
American Academy of F	amily Physician	ns Political A	Action Co	ommittee			
ADDRESS (number and street)	1133 Connecticut Ave	nue, NW					
Check if different	Suite 1100						
than previously reported. (ACC)	Washington				DC	20036	
2. FEC IDENTIFICATION NUM	MBER ▼	CITY 🛦		5	STATE 🛦		ZIP CODE A
C C00411553		3. IS THIS REPORT	\ \ \	IEW N) OR		AMENDED (A)	
4. TYPE OF REPORT (Choose One)	(b) Monthly Report	Feb 20 (M2)		May 20 (M5)	А	ug 20 (M8)	Nov 20 (M11) (Non-Election Year Only)
(a) Quarterly Reports:	Due On:	Mar 20 (M3)		lun 20 (M6)		ep 20 (M9)	Dec 20 (M12) (Non-Election Year Only)
April 15	.	Apr 20 (M4)	J	lul 20 (M7)	× c	Oct 20 (M10)	Jan 31 (YE)
Quarterly Report (Q1) July 15 Quarterly Report (Q2)	PRE-Election	on	rimary (12P		1	ral (12G)	Runoff (12R)
October 15 Quarterly Report (Q3)	Report for t	the: C	onvention (12C)	Specia	al (12S)	
January 31 Year-End Report (YE)		Election on	M M /	D D /	Y Y Y	Y	in the State of
July 31 Mid-Year Report (Non-election Year Only) (MY)	(d) 30-Day POST-Elect		eneral (30G	i)	Runof	ff (30R)	Special (30S)
Termination Report (TER)	,	Election on	M = M /	D D /	Y Y Y Y	Y	in the State of
5. Covering Period 09	/ D D / Y Y 2	2013	through	09 09	30	/ Y Y 201	
certify that I have examined this	•	est of my knowl	edge and b	pelief it is tru	e, correct	and complet	e.
Type or Print Name of Treasurer	Hugh M Taylor MD						
Signature of Treasurer Hugh M	1 Taylor MD	[H	Electronically	<i>Filed]</i> D	ate 10	D 16	2013
NOTE: Submission of false, erroneo	us, or incomplete infor	mation may subj	ect the pers	son signing th	is Report t	o the penaltie	es of 2 U.S.C. §437g.
Office Use Only							FORM 3X ev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003) Page 2

Write or Type Committee Name

American Academy of Family Physicians Political Action Committee

2013 09 30 Report Covering the Period: 2013 From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 402087.22 January 1. 2013 (b) Cash on Hand at 334946.02 Beginning of Reporting Period..... 287273.27 31494.30 (c) Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 366440.32 689360.49 6(a) and 6(c) for Column B)..... 20397.41 343317.58 Total Disbursements (from Line 31)...... Cash on Hand at Close of 8. Reporting Period 346042.91 346042.91 (subtract Line 7 from Line 6(d)).....

Debts and Obligations Owed **TO** the Committee (Itemize all on
 Schedule C and/or Schedule D)

Debts and Obligations Owed BY
 the Committee (Itemize all on Schedule C and/or Schedule D)





This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission 999 E Street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

American Academy of Family Physicians Political Action Committee

I. Receipts	COLUMN A	COLUMN B
	Total This Period	Calendar Year-to-Date
. Contributions (other than loans) From:		
(a) Individuals/Persons Other		
Than Political Committees	40044.04	192382.46
(i) Itemized (use Schedule A)	16814.01	192302.40
(ii) Haitaminad	14200.00	84527.56
(ii) Unitemized(iii) TOTAL (add	14390.00	04321.30
Lines 11(a)(i) and (ii)	31204.01	276910.02
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees	0.00	0.00
(such as PACs)	0.00	0.00
(d) Total Contributions (add Lines		
11(a)(iii), (b), and (c)) (Carry	04004.04	276910.02
Totals to Line 33, page 5)	31204.01	276910.02
2. Transfers From Affiliated/Other		
Party Committees	0.00	0.00
3. All Loans Received	0.00	0.00
3. All Loans Received	7	0.00
A. Jase Bergermante Bessined	0.00	0.00
Loan Repayments Received	0.00	0.00
5. Offsets To Operating Expenditures		
(Refunds, Rebates, etc.)	290.29	2863.25
(Carry Totals to Line 37, page 5)		2000.20
to Federal Candidates and Other		
Political Committees	0.00	7500.00
7. Other Federal Receipts	0.00	7300.00
(Dividends, Interest, etc.)	0.00	0.00
3. Transfers from Non-Federal and Levin Funds	0.00	0.00
(a) Non-Federal Account		
(from Schedule H3)	0.00	0.00
(, , , ,	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(b) Leviii Fuilus (IIOIII Scriedule 113)	7	0.00
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00
Total Receipts (add Lines 11(d),		
12, 13, 14, 15, 16, 17, and 18(c))▶	31494.30	287273.27
). Total Federal Receipts		
(subtract Line 18(c) from Line 19)▶	31494.30	287273.27

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements		Total This Period			
21. C	Operating Expenditures: a) Allocated Federal/Non-Federal		Calendar Year-to-Date		
	Activity (from Schedule H4) (i) Federal Share	0.00	0.00		
	(i) i ederai Silaie				
	(ii) Non-Federal Share	0.00	0.00		
(b) Other Federal Operating				
	Expenditures	397.41	4099.25		
(c) Total Operating Expenditures				
_	(add 21(a)(i), (a)(ii), and (b))▶	397.41	4099.25		
	ransfers to Affiliated/Other Party	0.00	0.00		
	Committees Contributions to	0.00	0.00		
F	Federal Candidates/Committees and Other Political Committees	20000.00	338500.00		
	ndependent Expenditures		7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7		
	use Schedule E)	0.00	0.00		
. (Coordinated Party Expenditures				
(2 U.S.C. §441a(d)) use Schedule F)	0.00	0.00		
	i				
L	oan Repayments Made	0.00	0.00		
		0.00	0.00		
	oans MadeRefunds of Contributions To:	0.00	0.00		
	a) Individuals/Persons Other Than Political Committees	0.00	718.33		
	man Follical Committees	0.00	7 10.00		
(b) Political Party Committees	0.00	0.00		
` .	c) Other Political Committees				
•	(such as PACs)	0.00	0.00		
,	d) Tatal Cantribution Defunds				
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))▶	0.00	718.33		
	(add Lines 20(a), (b), and (c))				
. (Other Disbursements	0.00	0.00		
F	Federal Election Activity (2 U.S.C. §431(20))				
(a) Allocated Federal Election Activity				
	(from Schedule H6)	0.00	0.00		
	(i) Federal Share	0.00	0.00		
	(") III - 1 - II OI	0.00	0.00		
/	(ii) "Levin" Shareb) Federal Election Activity Paid Entirely	0.00	3.55		
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00		
(c) Total Federal Election Activity (add				
(Lines 30(a)(i), 30(a)(ii) and 30(b))▶	0.00	0.00		
	() () () () () () () () () ()	7			
Т	otal Disbursements (add Lines 21(c), 22,				
2	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	20397.41	343317.58		
	L.				
	otal Federal Disbursements				
	subtract Line 21(a)(ii) and Line 30(a)(ii)	2227 11	040017.50		
fı	rom Line 31)	20397.41	343317.58		

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

1 LO 1 01111 3X (11ev. 02/2003)		i age J
III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
3. Total Contributions (other than loans) (from Line 11(d), page 3)	31204.01	276910.02
4. Total Contribution Refunds (from Line 28(d))	0.00	718.33
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	31204.01	276191.69
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	397.41	4099.25
7. Offsets to Operating Expenditures (from Line 15, page 3)	290.29	2863.25
8. Net Operating Expenditures (subtract Line 37 from Line 36)	107.12	1236.00

Use separate schedule(s) for each category of the Detailed Summary Page

FOR	LINE	NU	MBER	:	PAGE	6	OF	40
(che	ck only	or	ne)					
X	11a		11b		11c	12		
	13		14		15	16	;	17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

American Academy of Family Physicians Political Action Committee

/ / / / / / / / / / / / / / / / / / /	y i ffysicians i ontical Action Commit	
Full Name (Last, First, Middle Initial) Stoney A Abercrombie MD		Date of Receipt
Mailing Address 170 Graylyn Dr	Chate 7 oct	09 16 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Anderson	State Zip Code SC 29621-1982	Transaction ID : C2426559
		Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	150.00
Name of Employer	Occupation	1
AnMed Family Medicine	Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	300.00	
Full Name (Last, First, Middle Initial) Luz M Acevedo Vargas	'	Date of Receipt
Mailing Address 265A Calle 20		09 09 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID : C2419634
Guaynabo	PR 00969-4447	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	250.00
Name of Employer	Occupation	1
Self Employed	Physician	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) C. Patricia Park Ahlen MD	'	Date of Receipt
Mailing Address 409 Spyglass Dr		09 27 2013
City	State Zip Code	Transaction ID : C2436922
Eugene	OR 97401-2082	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	1
Self Employed	Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
SUBTOTAL of Receipts This Page (optional	al)	650.00
TOTAL This Period (last page this line nun	nber only)	

FOR	LINE	NU	IMBER	:	PAGE	7	OF	40
(che	ck only	or	ne)					
X	11a		11b		11c	12	!	
	13		14		15	16	;	17

or for commercial purposes, other than using	nd Statements may not be sold or used by any per g the name and address of any political committee	
NAME OF COMMITTEE (In Full)	v Dhysisiana Dalitical Astica Course	***
American Academy of Family	y Physicians Political Action Commi	<u>.</u>
Full Name (Last, First, Middle Initial) A. John W Aldis MD		Date of Receipt
Mailing Address 4911 River Rd		09 19 2013
City	State Zip Code	Transaction ID : C2430435
Shepherdstown	WV 25443-5066	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	1
Self Employed	Physician	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General	riggiogato roal to bate ¥	
Other (specify) ▼	750.00	
Full Name (Last, First, Middle Initial) James Douglas Aldstadt MD		Date of Receipt
Mailing Address 4202 Southridge Ct		M = M / D = D / Y = Y = Y
Ste 300	·	09 16 2013
City	State Zip Code	Transaction ID : C2426550
Englewood	OH 45322-2645	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer	Occupation	
Information Requested	Information Requested	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	00 0	
Other (specify) ▼	750.00	
Full Name (Last, First, Middle Initial) Patrick Norbert Arnold MD		Date of Receipt
Mailing Address 1990 Marywood Ln		09 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID : C2437513
Saint Paul	MN 55118-4744	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	150.00
Name of Employer	Occupation	+
Self Employed	Physician	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General	riggiogate real to Date ▼	
Other (specify) ▼	250.00	
SUBTOTAL of Receipts This Page (optional	l)	900.00
	<u>`</u>	
TOTAL This Period (last page this line num	nber only)	

Use separate schedule(s) for each category of the Detailed Summary Page

TOTT LITTE TOTTIBLITE					PAGE	=	8	OF	40
(che	ck only	or	ne)						
X	11a		11b		11c		12	2	
	13		14		15		16	6	17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions

or for commercial purposes, other than using	the name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full)	Physicians Political Action Committ	
Full Name (Last, First, Middle Initial) Justin V Bartos MD		Date of Receipt
Mailing Address 4300 Cagle Dr Ste 200		09 23 2013
City North Richland Hills	State Zip Code TX 76180-8380	Transaction ID : C2433260 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	42.00
Name of Employer North Hills Family Medicine Receipt For:	Occupation Physician	
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 378.00	
Full Name (Last, First, Middle Initial) Joane Goforth Baumer MD Mailing Address 910 Houston St Apt 701 City	State Zip Code	Date of Receipt 09 16 2013 Transaction ID : C2426489
Fort Worth FEC ID number of contributing federal political committee.	TX 76102-6224	Amount of Each Receipt this Period 80.00
Name of Employer Self Employed Receipt For: □ Primary □ General □ Other (specify) ▼	Occupation Physician Aggregate Year-to-Date ▼ 400.00	
Full Name (Last, First, Middle Initial) Janalynn Fish Beste MD Mailing Address 1212 Vanderhorst Pl		Date of Receipt
City Wilmington FEC ID number of contributing federal political committee.	State Zip Code NC 28405-5327	09 18 2013 Transaction ID: C2429399 Amount of Each Receipt this Period 365.00
Name of Employer University of North Carolina Receipt For: Primary General	Occupation Physician Aggregate Year-to-Date ▼	
Other (specify) ▼	365.00	487.00
SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line numb	·	487.00
TOTAL THIS Period (last page this line numb	ber orny)	

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:					PAGE		9	OF	40
(check only one)									
X	11a		11b		11c		12	2	
	13		14		15		16	6	17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

or for commercial purposes, other than using	g the name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full)	y Physicians Political Action Commit	
Full Name (Last, First, Middle Initial) A. Reid B Blackwelder MD		Date of Receipt
Mailing Address 4407 Leedy Rd 201 Cassel Dr		09 102013
City	State Zip Code	Transaction ID : C2423743
Kingsport	TN 37664-2117	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer	Occupation	
Quillen College of Medicine	Professor, Family Medicine	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	900.00	
Full Name (Last, First, Middle Initial) 3. Mott Parks Blair MD	'	Date of Receipt
Mailing Address 411 E Westbrook St		09 30 2013
City	State Zip Code	Transaction ID : C2437388
Wallace	NC 28466-1514	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	41.00
Name of Employer	Occupation	
Vidant Medicine - Greenville, NC	Physician	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 246.00	
Full Name (Last, First, Middle Initial) C. Julia Lett Boothe MD	'	Date of Receipt
Mailing Address 14670 Bel Aire Est		09 21 2013
City	State Zip Code	Transaction ID : C2432958
Coker	AL 35452-3514	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer	Occupation	-
Pickens Co Med Center	Clinic Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		
Other (specify) ▼	500.00	
SUBTOTAL of Receipts This Page (optional	nl)	641.00
TOTAL This Period (last page this line num	nber only)	

FOR L	PAGE	. 1	10	OF	40			
(check only one)								
X 1	1a	11b		11c		12		
1	3	14		15		16		17

	the name and address of any political committee to	
NAME OF COMMITTEE (In Full)		1
/ American Academy of Family	Physicians Political Action Commit	rtee
Full Name (Last, First, Middle Initial) A. Robert C M Bourne MD		Date of Receipt
Mailing Address 1538 Dwight St		09 16 2013
City	State Zip Code	Transaction ID : C2426577
Redlands	CA 92373-7013	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30.42
Name of Employer	Occupation	1
Beaver Medical Group	Physician	
Receipt For:	Aggregate Year-to-Date ▼	7
Primary General	00 0	
Other (specify) ▼	273.78	
Full Name (Last, First, Middle Initial) Robert C M Bourne MD		Date of Receipt
Mailing Address 1538 Dwight St		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	09 30 2013 Transaction ID : C2437414
Redlands	CA 92373-7013	Transaction ID : C2437414 Amount of Each Receipt this Period
_		our or Each neceipt this Period
FEC ID number of contributing federal political committee.	C	30.42
Name of Employer	Occupation	1
Beaver Medical Group	Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	00 0	
Other (specify) ▼	273.78	
Full Name (Last, First, Middle Initial) John R Bucholtz DO		Date of Receipt
Mailing Address 6378 Cape Cod Dr		09 23 _ 2013 _
City	State Zip Code	Transaction ID : C2433741
Columbus	GA 31904-2916	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	-
Columbus Regional Healthcare System	Physician	1
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		
Other (specify) ▼	250.00	
SUBTOTAL of Receipts This Page (ontional)		310.84
	<u>·</u> _	
TOTAL This Period (last page this line number	er only)	

FOR	LINE	NU	MBER	:	PAGE	: '	11	OF	40
(che	ck only	or	ne)						
X	11a		11b		11c		12		
	13		14		15		16	,	17

Any information copied from such Reports and or for commercial purposes, other than using	d Statements may not be sold or used by any pers the name and address of any political committee t	son for the purpose of soliciting contributions to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Academy of Family	Physicians Political Action Commit	itee
Full Name (Last, First, Middle Initial) Angela Caffaratti MD Mailing Address, 345 Pologota Pr		Date of Receipt
Mailing Address 345 Delegate Dr		09 03 2013
City	State Zip Code	Transaction ID : C2417322
Columbus	OH 43235-1470	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	-
MT CARMEL MEDICAL GROUP	PHYSICIAN	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	300.00	
Full Name (Last, First, Middle Initial) Mary F Campagnolo MD	·	Date of Receipt
Mailing Address 1561 Route 38 Ste 6		09 23 2013
City	State Zip Code	Transaction ID : C2433261
Lumberton	NJ 08048-2939	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer	Occupation	1
Virtua Medical Group, Marlton NJ	Physician	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	900.00	
Full Name (Last, First, Middle Initial) C. Lee Marvin Carter MD		Date of Receipt
Mailing Address PO BOX 506		09 30 2013
City	State Zip Code TN 38344-0506	Transaction ID : C2437389
Huntingdon	11V 30344-U3U0	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer	Occupation	1
Self-Employed	Physician	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify)	600.00	
SUBTOTAL of Receipts This Page (optional)	· · · · · · · · · · · · · · · · · · ·	250.00
TOTAL This Period (last page this line numb	er only)	

FOR LINE	NUMBER	: PAGE	12 OF	40		
(check only one)						
X 11a	11b	11c	12			
13	14	15	16	17		

Any information copied from such Reports and St or for commercial purposes, other than using the		
NAME OF COMMITTEE (In Full)		
` '	nysicians Political Action Committe	e
Full Name (Last, First, Middle Initial) Po-Shen Chang MD		Date of Receipt
Mailing Address 139 Monticello Dr		09 30 _ 2013 _
City	State Zip Code	Transaction ID : C2437495
Longview	WA 98632-9522	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	750.00
Name of Employer	Occupation	
Northwest Permanente	Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		
Other (specify) ▼	750.00	
Full Name (Last, First, Middle Initial) 3. Susan Archer Chiarito MD		Date of Receipt
Mailing Address 1901 Mission 66		09 16 2013
City	State Zip Code	Transaction ID : C2426487
Vicksburg	MS 39180-3711	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	41.00
Name of Employer	Occupation	
Mission Primary Care Clinic	Physician	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 205.00	
Full Name (Last, First, Middle Initial) C. David J Cleveland MD		Date of Receipt
Mailing Address 214 NE Idlewood St		09 23 2013 _
City	State Zip Code	Transaction ID : C2434312
Prineville	OR 97754-2047	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	250.00
Name of Employer	Occupation	
Self Employed	Physician	
Receipt For:	<u> </u>	
Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	250.00	
SUBTOTAL of Receipts This Page (optional)	•	1041.00
TOTAL This Period (last page this line number of	only)	

FOR LINE NUMBER: PAGE 13 OF 40 Use separate schedule(s) for each category of the Detailed Summary Page

	OH	LIIVL	IVO	IVIDLI		IAGL	- '	ı	Oi	70
(c	(check only one)									
	X	11a		11b		11c		12		
		13		14		15		16		17

	nd Statements may not be sold or used by any pers g the name and address of any political committee to					
NAME OF COMMITTEE (In Full)						
	y Physicians Political Action Commit	tee				
Full Name (Last, First, Middle Initial) A. Steven A Crawford MD	Date of Receipt					
Mailing Address 900 NE 10th St		M = M / D = D / Y = Y = Y				
OU Physicians Family Me		09 23 2013				
City						
Oklahoma City	OK 73104-5420	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	340.92				
Name of Employer	Occupation	1				
University of Oklahoma	Physician Faculty					
Receipt For:	Aggregate Year-to-Date ▼	1				
Primary General						
Other (specify) ▼	3977.24					
Full Name (Last, First, Middle Initial) Jose M David MD		Date of Receipt				
Mailing Address 804 Huntington Ct		09 25 2013				
City	State Zip Code	Transaction ID : C2434885				
Albany	NY 12203-6015	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	416.67				
Name of Employer	Occupation	-				
St Peters Health Partners Medical Asso	Family Physician					
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.02					
Full Name (Last, First, Middle Initial) C. Kisha Nicole Davis Davis		Date of Receipt				
Mailing Address 12342 Fellowship Ln		09 20 2013				
City	State Zip Code	Transaction ID : C2430906				
North Potomac	MD 20878-3403	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	30.00				
Name of Employer	Occupation	-				
Chase Brexton	Physician	_				
Receipt For:	Aggregate Year-to-Date ▼					
Primary General Other (specify) ▼	210.00					
SUBTOTAL of Receipts This Page (optional	ul)	787.59				
	nber only)					
/ I	.,					

ı	FOR LIN	IE NUMBEF	R: PAG	E 14 OF	40		
	(check only one)						
	X 11a	11b	11c	12			
	13	14	15	16	17		

Full Name (Last, First, Middle Initial) Bilisabeth K Farnum MD Mailing Address 33 Hyland Ave City State Zip Code RI 02818-2901 FEC ID number of contributing federal political committee. Name of Employer Other (specify) ▼ Full Name (Last, First, Middle Initial) Carol J Featherstone MD Aggregate Year-to-Date ▼ Date of Receipt Transaction ID : C2436168 Amount of Each Receipt this Period Fec ID number of contributing federal political committee. Aggregate Year-to-Date ▼ Date of Receipt Transaction ID : C2436168 Amount of Each Receipt this Period Date of Receipt Transaction ID : C2437528 Amount of Each Receipt this Period FEG ID number of contributing federal political committee. Name of Employer Park Micollet Clinic Primary City State Zip Code Park Transaction ID : C2437528 Amount of Each Receipt this Period Transacti	NAME OF COMMITTEE (In Full)	the name and address of any political committee Physicians Political Action Commi	
Agregate Year-to-Date ▼ City State Zip Code MN 55428-4522 New Hope MN 55428-4522 FEC ID number of contributing federal political committee. Name of Employer Primary General Other (specify) ▼ City State Zip Code MN 55428-4522 Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ City State Zip Code MN 55428-4522 Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ City State Zip Code MN 570.00 Date of Receipt Inic Period Transaction ID: C2437528 Amount of Each Receipt this Period Mount of Each Receipt this Period Transaction ID: C2417235 Amount of Each Receipt this Period Transaction ID: C2417235 Amount of Each Receipt Inic Period Transaction ID: C2417235 Amount of Eac	Full Name (Last, First, Middle Initial) Elisabeth K Farnum MD Mailing Address 33 Hyland Ave City East Greenwich FEC ID number of contributing federal political committee. Name of Employer Kent Hospital Receipt For: Primary General	State Zip Code RI 02818-2901 C Occupation Physician Aggregate Year-to-Date ▼	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 510 Aqua Ct City	Carol J Featherstone MD Mailing Address 4732 Utah Ave N City New Hope FEC ID number of contributing federal political committee. Name of Employer Park Nicollet Clinic Receipt For: Primary General	MN 55428-4522 C Occupation Physician Aggregate Year-to-Date ▼	09 30 2013 Transaction ID : C2437528 Amount of Each Receipt this Period
SUBTOTAL of Receipts This Page (optional)	City York FEC ID number of contributing federal political committee. Name of Employer Strategic Health Institute Receipt For: Primary General	PA 17403-3623 C Occupation Family Physician Aggregate Year-to-Date ▼	09 02 2013 Transaction ID : C2417235 Amount of Each Receipt this Period
	SUBTOTAL of Receipts This Page (optional)	<u> </u>	750.00

FOR LINE NUMBER:					PAGE	: ′	15	OF	40
(check only one)									
	11a		11b		11c		12		
	13		14		15		16		17

Any information copied from such Reports and S or for commercial purposes, other than using the		
NAME OF COMMITTEE (In Full)		
angle American Academy of Family P	hysicians Political Action Committe	ee
Full Name (Last, First, Middle Initial) A. Seth Yawki Flagg MD		Date of Receipt
Mailing Address 9129 Bradford Rd		09 08 2013
City	State Zip Code	Transaction ID : C2419174
Silver Spring	MD 20901-4917	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	35.00
Name of Employer	Occupation	
USN	Physicain	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		
Other (specify) ▼	480.00	
Full Name (Last, First, Middle Initial) Myron Arthur Fribush MD		Date of Receipt
Mailing Address PO Box 510		09 23 2013
City	State Zip Code	Transaction ID : C2433734
Klawock	AK 99925-0510	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	150.00
Name of Employer	Occupation	
Kitka Hospital	Physician	
Receipt For:	,	
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial)		
C. Ophelia Eugenia Garmon-Brown		Date of Receipt
Mailing Address 1918 Randolph Rd Ste 175		09 18 2013
City	State Zip Code	Transaction ID : C2429423
Charlotte	NC 28207-1107	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	250.00
Name of Employer	Occupation	
Self Employed	Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		
Other (specify) ▼	250.00	
SUBTOTAL of Receipts This Page (optional)		435.00
TOTAL This Period (last page this line number of	only)	

FOR LINE NUMBER:				PAGE	·	16	OF	40	
(check only one)									
X	11a		11b		11c		12		
	13		14		15		16	;	17

or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	g the name and address of any political committee	to solicit contributions from such committee.
/	y Physicians Political Action Commi	ttee
Full Name (Last, First, Middle Initial) James M Gill MD		Date of Receipt
Mailing Address 17 Henderson Hill Rd		09 23 / Y = Y = Y = Y = Y = Y = Y = Y = Y = Y
City	State Zip Code	Transaction ID : C2433737
Newark	DE 19711-5958	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	370.00
Name of Employer	Occupation	
Family Medicine at Greenhill	Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		
Other (specify) ▼	370.00	
Full Name (Last, First, Middle Initial) 3. Olivia M Graves MD	·	Date of Receipt
Mailing Address 14150 Old Cutler Ro		09 30 2013
City	State Zip Code	Transaction ID : C2437506
Palmetto Bay	FL 33158-1345	Amount of Each Receipt this Period
FEC ID number of contributing		
federal political committee.	C	187.50
Name of Employer	Occupation	7
Information Requested	Information Requested	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	275.00	
Other (specify) ▼	375.00	
Full Name (Last, First, Middle Initial) 2. Jeffrey Scott Grove MD		Date of Receipt
Mailing Address 11 Baymont St Apt 1002		09 01 2013 _
City	State Zip Code	Transaction ID : C2417208
Clearwater	FL 33767-1720	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	
Suncoast Family Medical Associates	Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	750.00	
Other (specify) ▼	750.00	
SUBTOTAL of Receipts This Page (optional	ıl)	807.50
TOTAL This Period (last page this line num	nber only)	1

SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER: PAGE 17 OF Use separate schedule(s) (check only one)

TEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a
Any information copied from such Reports and S or for commercial purposes, other than using the		
NAME OF COMMITTEE (In Full) American Academy of Family P	hysicians Political Action Comm	nittee
Full Name (Last, First, Middle Initial) Tanya Lila Hamilton Mailing Address 1109 Cortez Ave City Billings FEC ID number of contributing federal political committee. Name of Employer Self Employed Receipt For: Primary General Other (specify)	State Zip Code MT 59105-5432 C Occupation Physician Aggregate Year-to-Date ▼ 250.00	Date of Receipt 99 18 2013 Transaction ID: C2429415 Amount of Each Receipt this Period 250.00
Full Name (Last, First, Middle Initial) Daniel J Heinemann MD Mailing Address 1305 W 18th St City Sioux Falls FEC ID number of contributing federal political committee. Name of Employer Sioux Valley Health Systems Receipt For: Primary General Other (specify)	State Zip Code SD 57105-0401 C Occupation Physician Aggregate Year-to-Date ▼ 950.00	Date of Receipt 09 04 2013 Transaction ID : C2417977 Amount of Each Receipt this Period 100.00
Full Name (Last, First, Middle Initial) Ernesto Herfter Herfter-Bueno MC Mailing Address 7315 Golden Glow Way NE City Albuquerque FEC ID number of contributing federal political committee. Name of Employer Presbyterian Medical Group Receipt For: Primary General Other (specify)	State Zip Code NM 87113-1329 C Occupation Physician Aggregate Year-to-Date ▼ 300.00	Date of Receipt 99 18 2013 Transaction ID: C2429468 Amount of Each Receipt this Period 200.00
SUBTOTAL of Receipts This Page (optional))	550.00
TOTAL This Period (last page this line number	only)	.

ı	FOR LINE NUMBER:				PAGE	. 1	18	OF	40
	(check only one)								
	X 118	a 🗌	11b		11c		12		
	13		14		15		16		17

	ng the name and address of any political committee	
, ,	ily Physicians Political Action Comm	ittee
Full Name (Last, First, Middle Initial) Let Ernesto Herfter Herfter-Bueno M Mailing Address 7315 Golden Glow Way		Date of Receipt
City	State Zip Code	09 30 2013
Albuquerque	NM 87113-1329	Transaction ID : C2437737 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer Presbyterian Medical Group Receipt For:	Occupation Physician	
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) Thu Nguyen Howell Howell		Date of Receipt
Mailing Address 2222 Neilson Way Unit 301		09 22 2013
City	State Zip Code	Transaction ID : C2433163
Santa Monica FEC ID number of contributing federal political committee.	CA 90405-2281	Amount of Each Receipt this Period 60.00
Name of Employer Self	Occupation Physician	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 420.00	
Full Name (Last, First, Middle Initial) Elvin C Irvin MD		Date of Receipt
Mailing Address 555 E Cheves St		09 08 2013
City Florence	State Zip Code SC 29506-2617	Transaction ID : C2444908 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	91.50
Name of Employer	Occupation	
Baptist Health Care Receipt For:	Physician	\dashv
Receipt For: Primary	Aggregate Year-to-Date ▼ 725.50	
SURTOTAL of Receipts This Page (option	nal)	251.50
	<u>▶</u>	
TOTAL This Period (last page this line nu	mber only)	I

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:				PAGE	1	19	OF	40	
(check only one)									
>	1 1a	1	1b		11c		12		
	13	14	4		15		16		17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions

Full Name (Last, First, Middle Initial)	Physicians Political Action Committee	
Samantha Lewellen Jackson MD		Date of Receipt
Mailing Address PO Box 826 401 N Hill St		09 30 2013
City	State Zip Code	Transaction ID : C2437502
Hobart	OK 73651-0826	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	365.00
Name of Employer	Occupation	
Self Employed	Physician	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	365.00	
Full Name (Last, First, Middle Initial) Marilyn Jones MD		Date of Receipt
Mailing Address 1 W National Rd		M = M / D = D / Y = Y = Y
City	State Zip Code	09 30 2013 Transaction ID : C2437501
Vandalia	OH 45377-1932	Transaction ID : C2437501 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	370.00
Name of Employer	Occupation	,
Vandalie Family Practice	Physician	
Receipt For:		
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 370.00	
Full Name (Last, First, Middle Initial)		
Gregory King MD		Date of Receipt
Mailing Address 1120 Vail Rd		09 09 2013
City	State Zip Code	Transaction ID : C2419619
Bennington	VT 05201-9597	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	
Primary Care Health Partners - VT, LLP	Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	400.00	
SUBTOTAL of Receipts This Page (optional).		785.00

ı	FOR LINE	E NUMBER	: PAGE	E 20 OF	40		
	(check only one)						
	X 11a	11b	11c	12			
	13	14	15	16	17		

	nd Statements may not be sold or used by any per- the name and address of any political committee t	
NAME OF COMMITTEE (In Full)	B B	
/ American Academy of Family	/ Physicians Political Action Commit	ttee
Full Name (Last, First, Middle Initial) Jason L Knudson MD		Date of Receipt
Mailing Address 1420 N 10Th St		09 16 2013
City	State Zip Code	Transaction ID : C2426557
Spearfish	SD 57783-1532	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	370.00
Name of Employer	Occupation	1
RHP	Physician	
Receipt For:	Aggregate Year-to-Date ▼]
Primary General		
Other (specify) ▼	370.00	
Full Name (Last, First, Middle Initial) Jon David Larson MD		Date of Receipt
Mailing Address 2111 Memory Ln		09 30 _2013 _
City	State Zip Code	Transaction ID : C2437529
Detroit Lakes	MN 56501-4828	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	600.00
Name of Employer	Occupation	1
Merit Care Health Systems	Physician	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General Other (specify) ▼	600.00	
Full Name (Last, First, Middle Initial) C. Geoffrey L Loman MD	·	Date of Receipt
Mailing Address 168 N Brent St Ste 502		09 23 2013
City	State Zip Code	7 Transaction ID : C2433735
Ventura	CA 93003-2840	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	1
Brent Street Family Practice	Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	500.00	
Other (specify) ▼	500.00	
SUBTOTAL of Receipts This Page (optional)	1220.00
	·	
TOTAL This Period (last page this line number	ber only)	

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE		: PAG	E 21 OF	40
(check only	one)			
X 11a	11b	11c	12	
13	14	15	16	17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

or for commercial purposes, other than using	the name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Academy of Family	Physicians Political Action Committ	tee
Full Name (Last, First, Middle Initial) 1. Janice E Luth MD		Date of Receipt
Mailing Address 4830 Rucker Rd 4830 Rucker Rd		09 16 _ 2013 _
City	State Zip Code	Transaction ID : C2426537
Moneta	VA 24121-5281	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	300.00
Name of Employer	Occupation	
Information Requested	Information Requested	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	300.00	
Full Name (Last, First, Middle Initial) 3. Charles G Marler MD		Date of Receipt
Mailing Address PO BOX 990		M = M / D = D / Y = Y = Y
670 Park Ave		09 16 2013
City	State Zip Code	Transaction ID : C2426578
Shelby	MT 59474-0990	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer	Occupation	
Self Employed	Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	Aggregate rear-to-Date ▼	
Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial) C. Amy Kristen McIntyre MD		Date of Receipt
Mailing Address 1140 W Diamond St		09 08 2013
City	State Zip Code	Transaction ID : C2419176
Butte	MT 59701-1404	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	33.18
Name of Employer	Occupation	
Butte Community Health Center	Physician	
Receipt For:		
Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	265.44	
SUBTOTAL of Receipts This Page (optional).		833.18
TOTAL This Period (last page this line numb	er only)	

FOR LINE NUMBER: PAGE 22 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

40

for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Family Physicians Political Action Committee Full Name (Last, First, Middle Initial) John S Meigs MD Date of Receipt Mailing Address PO Box 289 100 Serendipity Dr 2013 City Zip Code State Transaction ID: C2426579 **Brent** AL 35034-0289 Amount of Each Receipt this Period FEC ID number of contributing 75.00 federal political committee. Name of Employer Occupation Self Employed Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 800.00 Other (specify) Full Name (Last, First, Middle Initial) B. Lloyd Michener MD Date of Receipt Mailing Address Box 2914 DUMC 09 30 2013 City State Zip Code Transaction ID: C2437519 NC Durham 27710-0001 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer Occupation **Duke University** Family Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) c. Anne M Montgomery MD Date of Receipt Mailing Address 1708 S Martin St 09 24 2013 City Zip Code State Transaction ID: C2434751 WA Spokane 99203-3751 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. Name of Employer Occupation self physician Receipt For: Aggregate Year-to-Date ▼ Primary General 2250.00 Other (specify) 1325.00 SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

	FOR LINE NUMBER: PAGE 23 OF								
	(check only one)								
for each category of the Detailed Summary Page	X 11a 11b 11c 12								
, , , , , , , , , , , ,	13 14 15 16	_							

	Statements may not be sold or used by any persole name and address of any political committee to	
NAME OF COMMITTEE (In Full)		
ig angle American Academy of Family F	Physicians Political Action Committ	ee
Full Name (Last, First, Middle Initial) A. Dale C Moquist MD		Date of Receipt
Mailing Address 4318 Lake Walk Ct		09 08 2013
City	State Zip Code	Transaction ID : C2419175
Missouri City	TX 77459-3268	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	90.91
Name of Employer	Occupation	
Memorial Family Medicine Residency	Family Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	727.28	
Full Name (Last, First, Middle Initial) Susan Murphey MD		Date of Receipt
Mailing Address 151 Eastbrook Dr		09 23 2013
City	State Zip Code	Transaction ID : C2434326
Boone	NC 28607-3667	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	365.00
Name of Employer	Occupation	
Self Employed	Physician	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 365.00	
Full Name (Last, First, Middle Initial) C. Mary S Nguyen MD		Date of Receipt
Mailing Address 5727 Welsch Vw		09 02 2013
City	State Zip Code	Transaction ID : C2417236
San Antonio	TX 78249-3149	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	35.00
Name of Employer	Occupation	
Medina Valley Family Practice	Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		
Other (specify) ▼	270.00	
SUBTOTAL of Receipts This Page (optional)	•	490.91
TOTAL This Period (last page this line number	only)	

FOR LINE NUMBER: PAGE 24 OF Use separate schedule(s) for each category of the (check only one) X 11a 11b 11c

40

12 Detailed Summary Page 13 16 14 15

	Statements may not be sold or used by any person ename and address of any political committee to	
NAME OF COMMITTEE (In Full) American Academy of Family P	hysicians Political Action Committ	ee
Full Name (Last, First, Middle Initial) Joseph Scott Nichols Mailing Address 313 Scott St		Date of Receipt
		09 20 2013
City	State Zip Code	Transaction ID : C2430908
Baltimore	MD 21230-2109	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	33.18
Name of Employer	Occupation	
Medstar Franklin Square Med Center	Physician	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 265.44	
Full Name (Last, First, Middle Initial) Jaime Gabriel Oakley MD		Date of Receipt
Mailing Address 1225 E Weisgarber Rd		M = M / D = D / Y = Y = Y
Summit Medical Group, PLLC		09 30 2013
City Knoxville	State Zip Code TN 37909-2604	Transaction ID : C2437537
	0.000 200 .	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	
Summit Medical Group, PLLC	Physician	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) C. Javette C Orgain MD		Date of Receipt
Mailing Address PO Box 806527		09 102013
City	State Zip Code	Transaction ID : C2444909
Chicago	IL 60680-4126	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	125.00
Name of Employer	Occupation	
UNIVERSITY OF ILLINOIS COLLEGE OF MED	PHYSICIAN	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1125.00	
SUBTOTAL of Receipts This Page (optional)		408.18
TOTAL This Period (last page this line number		

FOR LINE NUMBER: PAGE 25 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

40

for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Family Physicians Political Action Committee Full Name (Last, First, Middle Initial) A Thomas Parsa MD Date of Receipt Mailing Address 2864 E Imperial Hwy 2013 City State Zip Code Transaction ID: C2425725 CA Brea 92821-6714 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Self Employed Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Michelle Quiogue MD Date of Receipt Mailing Address 2460 Pine St 09 20 2013 City State Zip Code Transaction ID: C2430905 Bakersfield CA 93301-2742 Amount of Each Receipt this Period FEC ID number of contributing 33.18 federal political committee. Name of Employer Occupation **KP-SCPMG** Family Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 265.44 Other (specify) Full Name (Last, First, Middle Initial) c. Alberto Ramos Mendez MD Date of Receipt Mailing Address PO BOX 1076 30 PO Box 1076 09 2013 City Zip Code State Transaction ID: C2437492 PR Aguada 00602-1076 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. Name of Employer Occupation Information Requested Information Requested Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 533.18 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAG								26 OF	-	40
	(che	ck only	or	ne)						
	×	11a		11b		11c		12		
		13		14		15		16		17

	statements may not be sold or used by any persone name and address of any political committee to	
NAME OF COMMITTEE (In Full)		
American Academy of Family	Physicians Political Action Commit	tee
Full Name (Last, First, Middle Initial) Robert Chuck Rich MD		Date of Receipt
Mailing Address PO BOX 10		M M / D D / Y Y Y Y Y
3744 Old Abbottsburg Rd City	State Zip Code	09 20 2013
City Bladenboro	NC 28320-0010	Transaction ID : C2430907 Amount of Each Receipt this Period
		Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	33.18
Name of Employer	Occupation	1
CCNC/LCF	Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	0.0	
Other (specify) ▼	265.44	
Full Name (Last, First, Middle Initial) Jeannine M Rodems MD		Date of Receipt
Mailing Address 15 Suncrest Dr		09 27 _2013 _
City	State Zip Code	09 27 2013 Transaction ID : C2436926
Soquel	CA 95073-9709	Amount of Each Receipt this Period
FEC ID number of contributing		
federal political committee.	C	365.00
Name of Employer	Occupation	
Self Employed	Family Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	0.0	
Other (specify) ▼	365.00	
Full Name (Last, First, Middle Initial) C. Flora F Sadri-Azarbayejani DO		Date of Receipt
Mailing Address 427 S Mountain Rd		09 24 2013
City	State Zip Code	Transaction ID : C2434735
Northfield	MA 01360-9684	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	
Gardner Family Medicine	Physician]
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	250.00	
Other (specify) ▼	350.00	
SUBTOTAL of Receipts This Page (optional)		448.18
	<u>*</u>	
TOTAL This Period (last page this line numbe	r only)	

	FOR LIN	E NUMBER	: PA	GE 27
Use separate schedule(s) for each category of the	(check or	ıly one)		
Detailed Summary Page	X 11a	11b	11c	12
	12	1/	15	16

OF

40

Any information copied from such Reports an or for commercial purposes, other than using	nd Statements may not be sold or used by any personal the name and address of any political committee to	son for the purpose of soliciting contributions to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Academy of Family	Physicians Political Action Commit	itee
Full Name (Last, First, Middle Initial) Sarah L Sams MD Mailing Address 2004 Freed Bd		Date of Receipt
Mailing Address 2994 Frazell Rd		09 30 2013
City	State Zip Code	Transaction ID : C2437390
Hilliard	OH 43026-9785	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	122.00
Name of Employer	Occupation	
Ohio Health	Physician	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	832.00	
Full Name (Last, First, Middle Initial) Richard M Shaw MD		Date of Receipt
Mailing Address 475 White Swan Ct		09 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID : C2437510
Simi Valley	CA 93065-6723	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	150.00
Name of Employer	Occupation	1
Regal Medical Group	Family Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	350.00	
Full Name (Last, First, Middle Initial) C. Aaron Burl Shives MD	<u> </u>	Date of Receipt
Mailing Address 350 28th Ave SE		09 01 2013
City	State Zip Code	Transaction ID : C2417207
Watertown	SD 57201-8403	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	36.50
Name of Employer	Occupation	
Brown Clinic	Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	255.50	
SUBTOTAL of Receipts This Page (optional)) >	308.50
TOTAL This Period (last page this line numb	per only)	

FOR LINE NUMBER:					PAGE	2	28	OF	40
(che	ck only	or	ne)						
X	11a		11b		11c		12		
	13		14		15		16		17

	the name and address of any political committee t	
NAME OF COMMITTEE (In Full)		
American Academy of Family	Physicians Political Action Commit	ttee
Full Name (Last, First, Middle Initial) Kari R Newquist Sikkink MD		Date of Receipt
Mailing Address 1639 Birchwood Dr		09 18 2013
City	State Zip Code	Transaction ID : C2429424
West Fargo	ND 58078-3427	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	1
Essentia Health	Physician	
Receipt For:	Aggregate Year-to-Date ▼]
Primary General		
Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) Glen R Stream MD		Date of Receipt
Mailing Address 1708 S Martin St		09 19 2013
City	State Zip Code	Transaction ID : C2430371
Spokane	WA 99203-3751	Amount of Each Receipt this Period
FEC ID number of contributing	0	
federal political committee.	C	250.00
Name of Employer	Occupation	
Rockwood Clinic	physician	1
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	2002.25	
Other (specify) ▼	2000.00	
Full Name (Last, First, Middle Initial) Erica Williams Swegler MD		Date of Receipt
Mailing Address 300 N Rufe Snow Dr		09 20 2013
City	State Zip Code	Transaction ID : C2444910
Keller	TX 76248-4235	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	102.27
Name of Employer	Occupation	
Self	Physician]
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	55 5	
Other (specify) ▼	693.17	
SUBTOTAL of Receipts This Page (optional)		602.27
. 5 (, ,	<u>r</u>	
TOTAL This Period (last page this line numb	er only)	

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 29 OF 4								40		
	(che	ck only	or	ne)						
	×	11a		11b		11c		12		
		13		14		15		16		17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions

Stacy J Taylor MD Mailing Address 173 E Cotton Hill Rd		Date of Receipt
Oit.	Otata Zin Ocale	09 20 2013
City New Hartford	State Zip Code CT 06057-3524	Transaction ID : C2430909
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 33.18
Name of Employer	Occupation	
Charlotte Hungerford Hospital	Physician	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 265.44	
Full Name (Last, First, Middle Initial) William J Taylor MD	•	Date of Receipt
Mailing Address 6404 Dry Cliff Cv		M = M / D = D / Y = Y = Y
City	State Zip Code	09 09 2013 Transaction ID : C2423666
Austin	TX 78731-3918	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	365.00
Name of Employer	Occupation	
Health Care Service Corporation	Medical Director	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 365.00	
Full Name (Last, First, Middle Initial)	ı	
Michael P Temporal MD		Date of Receipt
Mailing Address 180 S 3Rd St Ste 400 City	State Zip Code	09 02 2013
Belleville	IL 62220-1952	Transaction ID : C2417237 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	
So. Illinois Healthcare Foundation	Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	

SCHEDULE A (FEC Form 3X) ITE

FOR LINE NUMBER: PAGE 30 OF

11=====================================		TOTAL MONIBERT TAGE OF ST. 15										
EMIZED RECEIPTS	Use separate schedule(s)	(che	ck only	/ one)								
INIZED RECEIPTS	for each category of the Detailed Summary Page	×	11a	11b		11c		12				
	, 3		13	14		15		16		17		
y information copied from such Reports and Statements ma	ay not be sold or used by any pe	rson fo	or the	purpose (of so	liciting	con	tributi	ions			
for commercial purposes, other than using the name and a	ddress of any political committee	to sol	icit con	ntributions	fror	n such	cor	nmitte	96			

An or f NAME OF COMMITTEE (In Full) American Academy of Family Physicians Political Action Committee Full Name (Last, First, Middle Initial) Kimberly L Tjaden MD Date of Receipt Mailing Address 1490 Riverside Ave N 2013 15 City State Zip Code Transaction ID: C2426443 MN Sartell 56377-2348 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Name of Employer Occupation Physician Self Employed Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Pamela W Tuck MD Date of Receipt Mailing Address 4135 Atlanta Hwy 09 30 2013 City State Zip Code Transaction ID: C2437387 ΑL 36109-3022 Montgomery Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Name of Employer Occupation Self Employed Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify) Full Name (Last, First, Middle Initial) c. Randell K Wexler MD Date of Receipt Mailing Address 6040 Haybury Dr 2013 09 23 City State Zip Code Transaction ID: C2433723 OH New Albany 43054-8691 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Name of Employer Occupation Physician Ohio State University Receipt For: Aggregate Year-to-Date ▼ Primary General 2500.00 Other (specify) 1050.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NO (check only or X) 11a

FO	R LINE	PAGE	3	31	OF	40			
(che	eck only	on	ıe)						
×	11a		11b		11c		12		
	13		14		15		16	;	17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

or for commercial purposes, other than using	g the name and address of any political committee to	o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Academy of Famil	y Physicians Political Action Commit	tee
Full Name (Last, First, Middle Initial) Richard Andre Wherry MD Mailing Address 50 Takes Bu		Date of Receipt
Mailing Address 59 Tipton Dr		09 05 2013
City Dahlonega	State Zip Code GA 30533-1603	Transaction ID : C2418227 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Chestatee Regional Hospital	Occupation Physician	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	
Full Name (Last, First, Middle Initial) Mahrouf Musah Yusif Yusif Mailing Address 314 Bern St		Date of Receipt
Reading City	State Zip Code	09 23 2013 Transaction ID : C2433753
Reading	PA 19601-1206	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Information Requested	Occupation Information Requested	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial)		Date of Receipt
Mailing Address		M = M / D = D / Y = Y = Y
City	State Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	
Name of Employer	Occupation	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	
SUBTOTAL of Receipts This Page (optional	al)	500.00
TOTAL This Period (last page this line nun	nber only)	16814.01

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 32 OF 40 (check only one)
	y information copied from such Reports and Sta for commercial purposes, other than using the n		ay not be sold or used by any pe	
	NAME OF COMMITTEE (In Full) American Academy of Family Ph	ysicians	Political Action Comm	ittee
Α.	Full Name (Last, First, Middle Initial) American Academy of Family Physician Mailing Address 11400 Tomahawk Creek Pkwy City Leawood FEC ID number of contributing federal political committee.	State KS	Zip Code 66211-2672	Date of Receipt 9 23 2013 Transaction ID: C2437734 Amount of Each Receipt this Period 290.29
	Name of Employer Receipt For: Primary General Other (specify) ▼	Occupation Aggregate	Year-to-Date ▼ 2723.15	
В.	Full Name (Last, First, Middle Initial) Mailing Address City	State	Zip Code	Date of Receipt
	FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼	
	Full Name (Last, First, Middle Initial)			Date of Receipt
O.	Mailing Address			M - M / D - D / Y - Y - Y - Y
	City	State	Zip Code	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		
	Name of Employer	Occupation	1	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼	
s	UBTOTAL of Receipts This Page (optional)			290.29

TOTAL This Period (last page this line number only).....

290.29

S ľ

S	CHEDULE B (FEC Form 3X)			FO	R L	INE I	NUMBER	:			PAG	E 33	OF	40
IT	EMIZED DISBURSEMENTS		arate schedule(s) category of the	1 (01.		only			٦		101			7.00
			Summary Page			21b 27	22 28a		23 28b		24 28c	25		26 30b
Γ.	ay information against from such Danasta and Staton	l nonto movi	not be cold or us	and by a				nur		of o			ution	
	ny information copied from such Reports and Statem for commercial purposes, other than using the name													
	NAME OF COMMITTEE (In Full)													
	American Academy of Family Phys	icians P	Political Action	on Co	m	mitt	ee							
_	Full Name (Last, First, Middle Initial)						D-4	۲.	- la · · ·		-1			
Α.	American Express						Date o	of Dis	sburse			YYY	V	
	Mailing Address PO Box 53852						09			5	Ĺ	2013		
	City	State	Zip Code				Tran	eact	ion ID	· D	148106			
	Phoenix Purpose of Disbursement	AZ	85072-3852				ii aii	Juot	.0 1.0		140100			
	Bank card processing fee				Ī		Amour	nt of	Each	Dis	bursem	ent this	Peri	iod
	Candidate Name			Cate		//			-				8.13	
	Office Sought: House Disbursen	nent For:		Тур	ре			-	7		7			_
		Primary	General											
		Other (spec	cify) ▼											
_	State: District:													
D	Full Name (Last, First, Middle Initial)						Data	4 D:			_1			
Ь.	American Express						Date o					- Y - Y	V	
	Mailing Address PO Box 53852						09	/		9	/ Y	2013	= Y	
	Phoenix	State AZ	Zip Code 85072-3852				Tran	sact	ion ID	: D	148107	,		
	Purpose of Disbursement Bank card processing fee						Amour	nt of	Each	Dis	bursem	ent this	Peri	iod
	Candidate Name			Categ	gory	//			-		-		12.59	
	Office Courbby House			Тур				-	7		7		12.59	ш
	Office Sought: House Disbursen Senate	nent For: Primary	General											
		Other (spec												
	State: District:		•											
_	Full Name (Last, First, Middle Initial)						-							
C.	American Express						Date o							
	Mailing Address PO Box 53852						09	/	1	2	/ V	2013	- Y	
	•	State	Zip Code				Tran	sact	ion ID	· D	148656	<u> </u>		
	Phoenix Purpose of Disbursement	AZ	85072-3852					-						
	Bank card processing fee				T		Amour	nt of	Fach	Dis	hursem	ent this	Peri	iod
	Candidate Name			Cate		//	7411041	01	Zuon	D .0	-		2.97	
	Office Sought: House Disbursen	nent For:	I						7		7			
		Primary	General											
		Other (spec	cify) 🔻											
	State: District:													
5	SUBTOTAL of Disbursements This Page (optional)					•			7		-	2	3.69	
ļ,	OTAL This Period (last page this line number only)					_			-			-		「
1 '	TITLE THIS I CHOOL (last page this line number only)				• • • • •				7		- 7			

S	CHEDULE B (FEC Form 3X)					1517				т.		AGE 34 OF 40				
	· ·	Use separate sche	edule(s)		FOR LINE NUMBER: (check only one)		AGE	L 34 UF 4		40						
11	EMIZED DISBURSEMENTS	for each category	of the		X 2	-	22		23	24		25		7 26		
		Detailed Summary	Page			27	28a		28b	28		29		30b		
_	and information and all from such Day 1997		lal and d	Like												
	ny information copied from such Reports and Stater for commercial purposes, other than using the nan													S		
٣		io and address of al	iy political	COIII	··········	,	JOHOIL CO	iiiii	-au0115	noili 8	Juon C	, Jillilli	ucc.			
$ \setminus$	NAME OF COMMITTEE (In Full)	1.1. B 1141		_		• • •										
1/	American Academy of Family Phys	sicians Politica	I Action	ı Cc	omr	nıtte	e									
\angle	Full Name (Last, First, Middle Initial)					-										
Δ	,						Date of	f Dir	chureo	mant						
Λ.	American Express							יוטו:								
	Mailing Address PO Box 53852						09	/	16	_		y y y 2013	- Y			
	Walling Address 1 O Box 33032						03		1,	,		2010				
	City	State Zip Cod	de			+	_			_						
	Phoenix	AZ 85072-					Trans	acti	ion ID	: D148	657					
	Purpose of Disbursement			-	-											
	Bank card processing fee			_	_		Amoun	t of	Each	Disbur	semer	nt this	Peri	od		
	Candidate Name			Cate	gorv	/		_	-				7.04			
					pe				7				7.31			
	Office Sought: House Disburser	nent For:														
	Senate	Primary Ge	eneral													
	President	Other (specify) ▼														
	State: District:															
	Full Name (Last, First, Middle Initial)															
В.	American Express						Date of	f Dis	sburse	ment						
							M = M	/	D	D /	Υ	YY	■ Y			
	Mailing Address PO Box 53852						09	J	1	7	2	2013				
	<u> </u>	_								_						
	•	State Zip Coo					Trans	sacti	ion ID	: D148	658					
	Phoenix Purpose of Disbursement	AZ 85072-	3852													
	Bank Card processing fee					7	Amoun	t of	Fach	Dishur	semor	nt thic	Peri	od		
	Candidate Name		L		-	4	, anoull	. 01	Lucii	J.SDUI	,ciliel		. 311	Ju		
				Cate	gory. pe	/	1 .					_ 1	1.38			
	Office Sought: House Disburser	nent For:		ıy	۲۰	-			7							
	Senate		eneral													
	President	Other (specify) ▼														
	State: District:	√-1: ' J/ ♥														
_	Full Name (Last, First, Middle Initial)															
C.	American Express						Date of	f Dis	sburse	ment						
	Amonoan Express						M M	,	D		Y	ΥΥΥ	V			
	Mailing Address PO Box 53852					\neg	09		19			2013	- т			
	<u> </u>															
	City	State Zip Cod	de				Trans	2006	ion ID	: D148	650					
	Phoenix	AZ 85072-	3852				mans	acti	טו ווטו	. 140	บวล					
	Purpose of Disbursement Bank card processing fee		Г	_	-	7										
							Amoun	t of	Each	Disbur	semer	nt this	Peri	od		
	Candidate Name			Cate		/						1	6.25			
	000	. =		Ту	ре			_	7				5.23			
	Office Sought: House Disburser		_													
	Senate	,	eneral													
	President	Other (specify) ▼														
	State: District:															
								_					4.04			
8	SUBTOTAL of Disbursements This Page (optional)					•			7			3	4.94			
Г						_			-							
IТ	'OTAL This Period (last nage this line number only)															

S ľ

SC	CHEDULE B (FEC Form 3X)				FOR I	LINE	NUMBER	R:			PAGE	35	OF 4	10
ITE	EMIZED DISBURSEMENTS		arate schedule(s) category of the	\ I	(checl	k only	_							
			Summary Page		×	21b	22		23		24	25		26
_						27	28a		28b		28c	29		30b
	y information copied from such Reports and Staten for commercial purposes, other than using the nam													
	NAME OF COMMITTEE (In Full)													
	American Academy of Family Phys	icians P	Political Action	on (Com	mitt	ee							
	Full Name (Last, First, Middle Initial)						_							
Α.	American Express						Date	of Di	sburse			Y	Y	
	Mailing Address PO Box 53852						09	_	2	3		2013		
	,	State	Zip Code				Tran	sact	ion ID	: D1	148660			
	Phoenix Purpose of Disbursement	AZ	85072-3852											
	Bank card processing fee						Amou	nt of	Each	Disk	ourseme	nt this	Period	
	Candidate Name				ategor Type	ry/			,	_		2	6.49	
	Office Sought: House Disbursen Senate	nent For: Primary	General											
	President State: District:	Other (spec	cify) 🔻											
														_
	Full Name (Last, First, Middle Initial) American Express						Date	of Di	sburse	mer	nt			
	Mailing Address PO Box 53852						09	M /		.7		2013	Y	
	Oth.	21-1-	Zin Codo											
	City S Phoenix	State AZ	Zip Code 85072-3852				Trar	sact	ion ID	: D1	148661			
	Purpose of Disbursement Bank card processing fee			Г	-		Amou	nt of	Each	Dist	ourseme	ent this	Period	
	Candidate Name				ategor Type	y/				T			6.24	1
	Office Sought: House Disbursen	nent For:	l		. 7 -						,			
		Primary	General											
	President State: District:	Other (spec	cify) ▼											
	Full Name (Last, First, Middle Initial)						Data	- (D:	. 1					
C.	American Express						Date	וט וט	sburse					
	Mailing Address PO Box 53852						09	M /	3	_		2013	Y	
	-	State AZ	Zip Code				Trar	sact	ion ID	: D¹	148662			
	Purpose of Disbursement	AZ	85072-3852			\dashv								
	Bank card processing fee						Amou	nt of	Each	Disk	ourseme	nt this	Period	
	Candidate Name				ategor Type	ry/				<u> </u>		1:	3.54	1
	Office Sought: House Disbursen	nent For:												
		Primary	General											
		Other (spec	cify) 🔻											
_	State: District:													
SI	JBTOTAL of Disbursements This Page (optional)					<u> </u>			7	_	-1	46	6.27	
TO	OTAL This Period (last page this line number only)					•			,		,]

S ľ

SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER:	PAGE 36 OF 40
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check onl	y one)	
	Detailed Summary Page	X 21b		
	, ,	27		8b 28c 29 30b
Any information copied from such Reports and State or for commercial purposes, other than using the national commercial purposes.				
NAME OF COMMITTEE (In Full)				
American Academy of Family Phys	sicians Political Acti	on Commit	tee	
Full Name (Last, First, Middle Initial)				
A. American Express			Date of Disbu	ursement
Mailing Address PO Box 53852			09	30 2013
City	State Zip Code		Transaction	ID : D148663
Phoenix	AZ 85072-3852		-	
Purpose of Disbursement Bank card processing fee			Amount of Ea	ach Disbursement this Period
Candidate Name		Category/ Type	,	7.95
Office Sought: House Disburse Senate	ment For: Primary General			
President State: District:	Other (specify) ▼			
Full Name (Last, First, Middle Initial)				
B. Bank Of America Merchant Service	es		Date of Disbu	
Mailing Address WA2-505-01-40 PO Box 2485			09	19 2013
City Spokane	State Zip Code WA 99210-2485		Transaction	n ID : D148667
Purpose of Disbursement Bank fee - returned item			Amount of Ea	ach Disbursement this Period
Candidate Name		Category/ Type		75.00
Office Sought: House Senate President State: Disburse	ment For: Primary General Other (specify)			
Full Name (Last, First, Middle Initial)				
C. Bank Of America Merchant Servic	es		Date of Disbu	ursement
Mailing Address WA2-505-01-40 PO Box 2485			09	19 2013
City Spokane	State Zip Code WA 99210-2485		Transaction	n ID : D148668
Purpose of Disbursement Bank fee - returned item]	
Candidate Name		Category/ Type	Amount of Ea	ach Disbursement this Period 36.00
Office Sought: House Disburse	ment For:	715-5		
Senate	Primary General			
President	Other (specify) ▼			
State: District:				
SUBTOTAL of Disbursements This Page (optional). TOTAL This Period (last page this line number only				118.95

SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER: PAGE 37 OF 40
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one)
	Detailed Summary Page	X 21b	22 23 24 25 26
		27	28a 28b 28c 29 30b
Any information copied from such Reports and Staten or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full)	and address of any political		South Commission of the Commission Commission
American Academy of Family Phys	icians Political Actio	n Committ	ee
	iolario i Olitical Motic		
Full Name (Last, First, Middle Initial)			D (D) .
A. Bank Of America Merchant Service	es		Date of Disbursement
Mailing Address WA2-505-01-40			09 03 2013
PO Box 2485			
•	State Zip Code		Transaction ID : D148080
Spokane Purpose of Disbursement	WA 99210-2485		
Bank card processing fee			Amount of Each Disbursement this Period
Candidate Name		Category/	
		Type	173.56
Office Sought: House Disburser			
	Other (appoint) — General		
President State: District:	Other (specify) ▼		
Full Name (Last, First, Middle Initial)			
В.			Date of Disbursement
			M = M / D = D / Y = Y = Y
Mailing Address			
City	State Zip Code		
	_μ		
Purpose of Disbursement			
Candidate Name			Amount of Each Disbursement this Period
Candidate Name		Category/ Type	
Office Sought: House Disbursen	nent For:	1,700	
Senate	Primary General		
President	Other (specify) ▼		
State: District:			
Full Name (Last, First, Middle Initial) C.			Date of Disbursement
.			M M / D D / Y Y Y Y
Mailing Address			
0.1	7: 0 1		
City	State Zip Code		
Purpose of Disbursement			
			Amount of Each Disbursement this Period
Candidate Name		Category/	
Office Sought: House Disburser	nont For:	Туре	7
	Primary General		
President	Other (specify)		
State: District:			
SUBTOTAL of Disbursements This Page (optional)			173.56
TOTAL This David //ast many 45% Page mounts			397.41
TOTAL This Period (last page this line number only)			

ITEMIZED DISBURSEMENTS		. FOR LINE	NUMBER: PAGE 38 OF 40
	Use separate schedule(s for each category of the Detailed Summary Page	(check only	
Any information copied from such Reports and State or for commercial purposes, other than using the na			
NAME OF COMMITTEE (In Full) American Academy of Family Physics American Physics A	sicians Political Act	tion Committ	ee
Full Name (Last, First, Middle Initial) 4. JIM GERLACH FOR CONGRESS	COMMITTEE		Date of Disbursement
Mailing Address PO Box 87			09 09 2013
City Uwchland	State Zip Code PA 19480		Transaction ID : D148094
Purpose of Disbursement Campaign contribution Candidate Name			Amount of Each Disbursement this Period
Rep. Jim Gerlach	ment For: 2014	Category/ Type	1000.00
Senate President	Primary General Other (specify)		
State: PA District: 06 Full Name (Last, First, Middle Initial) S. KURT SCHRADER FOR CONGR Mailing Address PO Box 3314	ESS		Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Oregon City	State Zip Code OR 97045		Transaction ID : D148274
Oregon City Purpose of Disbursement Campaign contribution			Transaction ID : D148274 Amount of Each Disbursement this Period
Oregon City Purpose of Disbursement Campaign contribution Candidate Name Rep. Kurt Schrader	OR 97045	Category/ Type	
Oregon City Purpose of Disbursement Campaign contribution Candidate Name Rep. Kurt Schrader Office Sought: House Disburse			Amount of Each Disbursement this Period
Oregon City Purpose of Disbursement Campaign contribution Candidate Name Rep. Kurt Schrader Office Sought: House Senate President State: OR District: 05 Full Name (Last, First, Middle Initial)	OR 97045 ment For: 2014 Primary General		Amount of Each Disbursement this Period 2500.00 Date of Disbursement
Oregon City Purpose of Disbursement Campaign contribution Candidate Name Rep. Kurt Schrader Office Sought: House Senate President State: OR District: 05 Full Name (Last, First, Middle Initial)	OR 97045 ment For: 2014 Primary General		Amount of Each Disbursement this Period 2500.00
Oregon City Purpose of Disbursement Campaign contribution Candidate Name Rep. Kurt Schrader Office Sought: House Senate President State: OR District: 05 Full Name (Last, First, Middle Initial) FRIENDS OF LOIS CAPPS Mailing Address PO Box 23940 City Santa Barbara	OR 97045 ment For: 2014 Primary General		Amount of Each Disbursement this Period 2500.00 Date of Disbursement
Oregon City Purpose of Disbursement Campaign contribution Candidate Name Rep. Kurt Schrader Office Sought: House Senate President State: OR District: 05 Full Name (Last, First, Middle Initial) FRIENDS OF LOIS CAPPS Mailing Address PO Box 23940 City Santa Barbara Purpose of Disbursement Campaign contribution	ment For: 2014 Primary General Other (specify) State Zip Code	Type	Amount of Each Disbursement this Period 2500.00 Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Oregon City Purpose of Disbursement Campaign contribution Candidate Name Rep. Kurt Schrader Office Sought: House Senate President State: OR District: 05 Full Name (Last, First, Middle Initial) FRIENDS OF LOIS CAPPS Mailing Address PO Box 23940 City Santa Barbara Purpose of Disbursement Campaign contribution Candidate Name Rep. Lois Capps	ment For: 2014 Primary General Other (specify) State Zip Code		Amount of Each Disbursement this Period 2500.00 Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Oregon City Purpose of Disbursement Campaign contribution Candidate Name Rep. Kurt Schrader Office Sought: Senate President State: OR District: 05 Full Name (Last, First, Middle Initial) C. FRIENDS OF LOIS CAPPS Mailing Address PO Box 23940 City Santa Barbara Purpose of Disbursement Campaign contribution Candidate Name Rep. Lois Capps	ment For: 2014 Primary General Other (specify) State Zip Code CA 93121	Type Category/	Amount of Each Disbursement this Period 2500.00 Date of Disbursement M M / D D / Y Y Y Y Y 09 09 2013 Transaction ID: D148091 Amount of Each Disbursement this Period

ľ

SCHEDULE B (FEC Form 3X)		FOR LINE I	NUMBER: PAGE 39 OF 40
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one)
	Detailed Summary Page	21b	22 🗙 23 24 25 26
		27	28a 28b 28c 29 30b
Any information copied from such Reports and Statem or for commercial purposes, other than using the nam			
NAME OF COMMITTEE (In Full)	o and address of any points		CONTRACTOR OF THE CONTRACTOR O
American Academy of Family Phys	icians Political Actio	n Committe	20
/ American Academy of Family Frilys			
Full Name (Last, First, Middle Initial)			
A. SIMPSON FOR CONGRESS			Date of Disbursement
Mailing Address 1497 DADKWAY DRIVE			09 09 2013
Mailing Address 1487 PARKWAY DRIVE			09 2013
City	tate Zip Code		Towns of the ID D4 40075
BLACKFOOT	ID 83221		Transaction ID : D148275
Purpose of Disbursement Campaign contribution			
Candidate Name			Amount of Each Disbursement this Period
Rep. Mike Simpson		Category/ Type	1500.00
	ent For: 2014	турс	
	Primary General		
President	Other (specify) ▼		
State: ID District: 02			
Full Name (Last, First, Middle Initial)			
B. TIBERI FOR CONGRESS			Date of Disbursement
Mailing Address 2931 E Dublin Granville Road			09 19 2013
Ste 2000			09 19 2013
City	tate Zip Code		Transaction ID : D148405
	OH 43231		Transaction ID . D140403
Purpose of Disbursement Campaign contribution			Amount of Each Disbursement this Period
Candidate Name			Amount of Each disbursement this Period
Rep. Pat Tiberi		Category/ Type	2500.00
•	ent For: 2014		
	Primary X General		
	Other (specify) ▼		
State: OH District: 12			
Full Name (Last, First, Middle Initial)	_		Date of Disbursement
c. SCOTT PETERS FOR CONGRES	>		
Mailing Address PO BOX 70980			09 19 2013
•	tate Zip Code		Transaction ID : D148404
WASHINGTON Purpose of Disbursement	DC 20024		
Campaign contribution			Amount of Each Disbursement this Period
Candidate Name		Category/	Amount of Each disbursement this Penou
Rep. Scott Peters		Type	2500.00
	ent For: 2014		,
	Primary General		
	Other (specify) ▼		
State: CA District: 52			
SURTOTAL of Dichurcomente This Base (anticas)			6500.00
SUBTOTAL of Disbursements This Page (optional)		<u> </u>	
I			

ľ

SCHEDULE B (FEC Form 3X)		FOR LINE I	NUMBER: PAGE 40 OF 40
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one)
	Detailed Summary Page	21b	22 🗙 23 24 25 26
		27	28a 28b 28c 29 30b
Any information copied from such Reports and Staten or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full)			
American Academy of Family Phys	icians Political Actio	on Committe	ee
Full Name (Last, First, Middle Initial)			D (D) .
A. MIKULSKI FOR SENATE COMMIT	TEE		Date of Disbursement
Mailing Address PO BOX 13147			09 09 2013
City	State Zip Code		Transaction ID D440000
BALTIMORE	MD 21203		Transaction ID : D148093
Purpose of Disbursement Campaign contribution			Amount of Each Disbursement this Period
Candidate Name		Category/	2500.00
Sen. Barbara A. Mikulski		Туре	2000.00
	nent For: 2016 Primary General Other (specify)		
State: MD District: 00	Caron (opcomy)		
Full Name (Last, First, Middle Initial)			
B. REED COMMITTEE			Date of Disbursement
Mailing Address PO BOX 8628			09 09 2013
CRANSTON	State Zip Code RI 02920		Transaction ID : D148113
Purpose of Disbursement Campaign contribution			Amount of Each Disbursement this Period
Candidate Name		Category/	2500.00
Sen. Jack Reed		Туре	2000.00
	nent For: 2014 Primary General		
President	Other (specify)		
State: RI District: 00	(-		
Full Name (Last, First, Middle Initial) C. COLLINS FOR SENATOR			Date of Disbursement
			M M / D D / Y Y Y Y
Mailing Address PO BOX 1096			09 09 2013
,	State Zip Code ME 04402		Transaction ID : D148092
Purpose of Disbursement Campaign contribution			Amount of Each Disbursement this Period
Candidate Name		Category/	
Sen. Susan Collins		Type	2500.00
Office Sought: House Senate President Disbursen	nent For: 2014 Primary General Other (specify) ▼		
State: ME District: 00			
SUBTOTAL of Disbursements This Page (optional)		·····	7500.00
TOTAL This Period (last page this line number only)		·····	20000.00